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Testimony of Albert A. Rizzo, MD

Chair-Elect of the Board of Directors of the

American Lung Association

To the

U.S. Environmental Protection Agency

On EPA Docket # EPA-HQ-OAR-2009-0491

**Federal Implementation Plans to Reduce Interstate
Transport of Fine Particulate Matter and Ozone**

Philadelphia, Pennsylvania

August 26, 2010

Thank you. I am Albert A. Rizzo, MD, Chief of the Section of Pulmonary and Critical Care Medicine at the Christiana Care Health Systems in Newark, Delaware where I practice in a large pulmonary/critical care/sleep medicine group. I serve on the faculty of Thomas Jefferson University Medical School here in Philadelphia and I volunteer for the American Lung Association and am currently the Chair-Elect of its National Board of Directors.

I am a pulmonary physician who specializes in the respiratory system—the airways, lungs and their blood vessels. The respiratory system is different from most of the other systems in the body because the lungs’ delicate tissues come into direct contact with the outside environment. What we breathe in affects our lungs—and once there, can impact other systems of the body.

That vulnerability to what we breathe in is why we fight so hard for healthy air. It is that vulnerability why the American Lung Association urges the U.S. Environmental Protection Agency to adopt the Clean Air Transport Rule—and to make it stronger.

Burning coal produces soot and ash, and at the same time emits sulfur dioxide, nitrogen dioxide, mercury, and other substances. The sulfur dioxide and nitrogen dioxide are ingredients of two of the most widespread and dangerous pollutants in the nation—ozone and particulate matter.

The ozone and particulate matter from coal-fired power plants attack the lungs in multiple ways.

When a person inhales ozone, the ozone reacts chemically with the respiratory tissues causing inflammation, like a “sunburn,” of the lung. Particulates are microscopic specks of soot, dust, and aerosols that are small enough to lodge deeply in the lungs where they can cause serious damage.

Breathing particulate matter and ozone can shorten life. They can cause tens of thousands of premature deaths each year. These pollutants cause coughing, wheezing, difficulty breathing and increase the risk of asthma attacks and make it more likely that people with lung diseases, such as asthma and COPD, will need medical care and hospitalization, including emergency care.

Children who regularly breathe high levels of ozone may face reduced lung function in adulthood. As adults they face significantly greater risk of developing lung disease later in life as well.

Particulate matter has additional hazards and has recognized threats to the cardiovascular system leading to an increased risk of heart attack and stroke, as well as developing lung cancer.

Making our mission more imperative is the fact that these problems affect all of us but some more than others. The most vulnerable people include children, teens, seniors, people with lung diseases like asthma and chronic obstructive pulmonary disease, people with cardiovascular disease, and people with diabetes. The burden also falls hard on people with low incomes who suffer disproportionately from the pollutants they breathe often because of where they tend to live. Healthy adults who work or exercise outdoors aren’t left out either, as studies show that their lungs are measurably affected by inhaling these toxic pollutants.

That's why this proposed rule is so important. EPA estimates that cutting emissions in these 31 states and in the District of Columbia will have profound public health benefits each year. The reduction in pollution will literally save the lives of roughly 14,000 – 36,000 people each year, prevent 26,000 admissions to hospitals and emergency departments, and 23,000 nonfatal heart attacks. Breathing less of these pollutants will prevent 240,000 asthma attacks, and 440,000 cases of acute bronchitis.

As a physician, I know what this means to my patients. My patients with asthma will have less need of their emergency relief medicine and the prospect of a more normal quality of life. My patients with chronic obstructive pulmonary disease won't suffer chest pains and coughing spells and shortness of breath as much. They won't have to confine their activities indoors as much because the air is so dangerous outside. My patients won't face increased risk of heart attack and stroke. They will not miss work or activities they love because they are sick.

More of them will stay out of the hospital and the emergency room. The quality of their life and very likely the length of their life will improve. Most importantly, they will not die simply because they breathed the air outside.

That's how it can be—cleaner air, healthier people. We need the help of this Clean Air Transport Rule to stop millions of tons of dangerous pollution from coming into Pennsylvania and Delaware. We need to clean up our own power plants so we are not spreading pollution to our neighbors.

In fact, we need to clean up millions more tons of these pollutants because even lower levels of pollution can mean even greater benefits. The American Lung Association urges EPA to adopt tighter limits on ozone than what are proposed in the Rule, to reflect the tighter national air quality standards that are coming this year.

All of us and particularly my patients need to breathe less ozone and particle pollution. We want the air coming across our state line to not add to the burden of these pollutants that we already have here in Pennsylvania and Delaware. We urge the Environmental Protection Agency to quickly move to adopt and put in place this important tool for our air.